

the history of lunacy practice, and it is of the utmost importance that its merits and demerits should be known speedily; for its justification, or otherwise, it will, apparently, be ere long necessary to place the results arrived at under it fairly and fully before the profession. Accurate statistics are called for, showing the total number of accidents, major and minor, occurring during a given period for which it can fairly be held responsible; the number of escapes, attended by accident or otherwise; the number of deaths by suicide and homicide; the proportion of attendants required to carry it out efficiently; and, lastly, it should especially be shown in what proportion, if any, the recoveries exceed those in English or other asylums. You rightly criticise the action taken by the trustees and directors of the institution in this matter; it is fairly open to question whether they are justified in so largely drawing upon the funds of a charitable institution as the leasehold or rental of some two or three thousand acres of land must entail for an object which can hardly be for the general good of the insane inmates, and which under the most favourable circumstances can only be participated in by an exceedingly limited number of them.

Most people will agree with your remarks that trustees and directors of endowed asylums should clearly keep before them the beneficent aims of original founders, and should not in any way be themselves the means of bringing an inquiry on themselves, such as has been the case in some other endowed charities.

I am, Sir, your obedient servant,
Dec. 13th, 1884. PARTIALLY OPEN DOORS.

SUCCESSFUL OPERATION FOR HERNIA IN A PATIENT WITH BRIGHT'S DISEASE.

To the Editor of THE LANCET.

SIR,—The following case may be deemed of sufficient interest for a place in THE LANCET. I must confess that I anticipated a very different result in a patient the subject of long-standing Bright's disease.

On Sept. 3rd, 1884, Thomas C—, aged sixty-eight, was admitted here suffering from chronic bronchitis and general dropsy. I found that his urine contained just one-third of albumen. Under treatment his bronchial symptoms were greatly relieved and the dropsy left him, but he remained very weak and anæmic and his urine unaltered. On Nov. 23rd he became the subject of strangulated femoral hernia. The symptoms were never urgent, nor the vomiting stercoraceous; but the taxis was unavailing. He could pass no flatus, his face assumed the anxious expression typical of abdominal mischief, and the tumour had become tender to the touch. On the afternoon of the next day (Nov. 24th) my colleague, Mr. W. Steer, gave the patient chloroform, and, with the assistance of Dr. Richmond Johnstone, I proceeded, with many misgivings for the ultimate result, to operate. In doing so I had to open the sac, which contained a knuckle of intestine only. The stricture was at the neck, and yielded to the edge of the knife with an audible snick. The patient passed flatus the same afternoon. On the third day the wound was again dressed with carbolised oil on lint, cotton-wool, and a spica. The sutures were taken out on the fifth day. On the eighth day the bowels were relieved for the first time in response to an enema, and again freely on the tenth day, when the wound was perfectly healed and the patient seemingly none the worse for his experience. The temperature, which was taken night and morning, never rose. The urine, which was tested on the day of operation, contained one-third of albumen.—Yours obediently,

R. J. SHEPHERD.

Rotherhithe Infirmary, S.E., Dec. 4th, 1884.

ROME AND ITS WATER-SUPPLY.

(From our own Correspondent.)

THAT Rome has a water-supply the finest for purity and abundance in Christendom is a fact long accepted by European authorities, repeated in the latest English treatise on the sanitary state of the city, and confirmed by the elaborate series of analyses made recently by Prof. Mauro of Naples, assisted by Drs. Piccini and Nasini of Rome, and superintended by Prof. Cannizzaro of the Roman University. An incidental allusion to the fact in my letter of Sept. 29th seems to have wounded the sanitary *chauvinisme* of Dr. Sizer of Brooklyn, who prefers the Abana and Pharpar of Long Island to all the rivers of the Eternal City. He is welcome to his opinion, advanced as it is with the "glorious certainty" of youth, but may I ask him to let me retain my own and to hazard a few reasons for its retention.

First, however, I must clear the discussion of a few misrepresentations imported into it by Dr. Sizer. He makes me say that the Roman water-supply has been "long known for purity as the finest in Christendom." What I really said was that it was "the finest for purity and abundance in Christendom," therein agreeing with Dr. L. Aitken, who ("Sanitary State of Rome," London, 1881, p. 13) says:—"The water-supply is so good and so abundant that no city in the world comes near it in that respect. From the aqueducts alone it amounts to nearly 300 gallons daily for each inhabitant, and the waters do not come from contaminated rivers or lakes." Again, Dr. Sizer quotes me as saying that the Roman water "contains *only* 50 grammes per 100 litres of residue," and italicises "*only*" as if he had expected me to exclaim, "How is that for pure!" What I did say was that, when evaporated, it left a residue of "not more than 50 grammes to the 100 litres," implying that its solid residue was within the "limit of tolerance" allowed in drinking-water by the first authorities in Europe. I might have added "well within that limit;" but how was I to know that Dr. Sizer's notions of "purity" were so much more "peculiar" than mine, or that the standard of tolerance which is good enough for Hygeiopolis is not good enough for Brooklyn.

Another point, Dr. Sizer says, "In benighted America we should call such water unfit for drinking, unless our object was the speediest possible creation of calculi." Would he be surprised to learn from Wanklyn that water may contain 40 grains of solid residue per gallon, and yet be quite fit for domestic use? or that (according to the same authority) the water supplied to the University of Bonn, though containing 45 grains of solid residue per gallon, is yet good enough for drinking, because "organically pure?" Dr. Sizer thinks that in America the imbibition of such water would "create" calculi—that, in fact, Americans have only to drink enough of it to produce any amount of stone, and make the graveyards of the present the quarries of the future. Perhaps he is right. I can only say that in Europe we are built on other lines; that calculi, whether "constitutional" or "local," are exceptionally rare here; and that if he fathers them on the drinking-water, the "stones of Rome will rise in mutiny."

But referring Dr. Sizer to Buzzard's masterly treatise on "Diseases of the Nervous System," Lecture XV., for another theory of calculo-genesis, let me quote to him what Professor Cannizzaro says on the question of drinking-water:—"The chemist and hygienist may consider the following rules as established by statistics. Water may be held to be good for drinking when it is limpid; when it is free from noteworthy quantities of organic matter, especially of animal origin, and from ammonia; when, after evaporation, it leaves a residue not exceeding 50 grammes per 100 litres; when this residue yields no other salts but those of the alkalies and alkaline earths, nor more than 30 grammes of earth carbonates, nor more than 4 grammes of magnesia, nor more than 6 grammes of sulphuric anhydride corresponding to the sulphates. Now, the results of the analyses of our four great drinking-waters, set forth at ample length in this report, completely satisfy these conditions, and therefore confirm the ancient renown of the Roman waters for excellence. The best are the Acqua Marcia and the Acqua Vergine, the former having the advantage of a lower temperature. The Acqua Felice, although, like the other two, free from organic matters, may be considered as

THE SUPERINTENDENTSHIP OF THE ABERDEEN LUNATIC ASYLUM.—Dr. Jamieson, one of the joint superintendents of this asylum, having, after forty years' service, expressed a wish to be relieved of the responsibility attaching to the senior officer, it has been decided that Dr. Jamieson's coadjutor, Dr. Reid, be appointed superintendent with full charge of the institution, and that Dr. Jamieson be appointed to the position of consulting physician with a salary of £300 per annum, and liberty to reside in the dwelling-house at Elmhill, rent free, during the pleasure of the managers.